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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 3387

SERIAL NUMBER 10/776,650	FILING OR 371(c) DATE 02/11/2004 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 532/2x4 (F-280 Cont III)
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/382,702 03/06/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/08/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

000530

## TITLE

Cervical disc replacement

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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